

Health Information Technology Commission
Minutes

Date: Thursday December 20, 2012
1:00pm – 4:00pm

Location: MDCH
1st floor Capital View Bldg
Conference Room B&C
201 Townsend Street
Lansing, Michigan 48913

Commissioners Present:

Greg Forzley, M.D. – Chair
Michael Chrissos-Phone
Dennis Swan
Mark Notman, Ph.D.
Nick Lyon
Tom Lauzon
Larry Wagenknecht, R.Ph.
Orest Sowirka, D.O.
David Behen
Robert Milewski

Commissioners Absent:

Toshiki Masaki – Vice Chair
Michael Gardner

Staff:

Meghan Vanderstelt
Kimberly Bachelder

Guests:

Cynthia Green Edwards
Bruce Wiegand
Tim Pletcher-phone
Suzina Orelli
Chris Buskulic
Philip Vigas

James Gartung
May Alkhafaj
Joel Wallace
Tom Shewchuk
Michelle Maitland
Doug Dietzman

Jason Werner
David Tschirhart
Tairus Taylor
Bonnie Wilkins
Helen Hill
Jeff Shaw

Minutes: The regular monthly meeting of the Michigan Health Information Technology Commission was held on Thursday December 20, 2012 at the Michigan Department of Community Health with ten Commissioners present.

A. Welcome & Introductions

1. Greg Forzley M.D, Chair for today's meeting, welcomed the HITC members and asked for each for a brief introduction.

B. Review and Approval of 10-18-12 meeting minutes

1. Minutes of the 10-18-12 meeting were approved and will be posted to the HIT Commission (HITC) website following the meeting.

C. Dashboard

1. Meghan Vanderstelt reviewed the December 2012 Dashboard and wrapped up the activities for the 2012 CY.
2. Vanderstelt reviewed the proposed 2013 HITC Dashboard:
 - a. New Dashboard will focus on goals to be achieved and progress on activities in 2013.
 - b. Vanderstelt worked with each group over last two months to develop reporting metrics to reflect current activity.
 - c. Where applicable, attempted to incorporate ONC reporting requirements within 2013 HITC dashboard.
 - d. The update area will provide general key areas in an effort to offer the HITC regular updates.
3. Commissioner Comment: Add more national benchmarking to compare how Michigan is doing on a national level in HIT/HIE. Ask the QO's again to participate in 2013 Dashboard. Going forward into 2013, the HITC will use the proposed 2013 dashboard and will add, delete, or modify as they see fit in the future.

D. 2012 ONC Annual Meeting Overview

1. Meghan Vanderstelt gave an update of key reflections observed at the 2012 ONC Annual meeting December 11-13.
 - a. Excellent learning opportunity to gauge HIE and HIT activity across the country and what is encouraged by the federal government
 - b. Biggest take away is that Michigan is not unique in the challenges we face in HIE, particularly as it relates to interoperability
 - c. Interoperability was the Buzz word of the conference
 - d. Care coordination and technology (Example: ADTs) was a common theme among all states that attended the conference. This particular theme is crucial to MDCH's goals towards integrated care and breaking down the silos within State government.
 - e. ONC continued to encourage the use of DIRECT as a stepping stone to data exchange. Although not the most sophisticated mode of transport, it is a gateway to more elegant modes of transport. Likewise, it is one of the few standardized modes out there and can lay the ground work for Stage 3 MU and query functionality. Key point stressed by ONC partners is it is a first step towards data exchange.
 - f. Video links were provided that included several webcasts of presenters and panels that participated in the 12/12 Public Day. In particular, the panel presentation titled "Health IT as the Foundation for the 3-Part Aim: was recommended by Vanderstelt.

E. 2013 DCH Priorities

1. DCH Chief Deputy Director Nick Lyon presented the 2013 DCH priorities that focused on transparency and reducing fragmentation
 - a. Key goals included: Health & Wellness, ACA, IT Initiatives, Provider Capacity & Access, Dual Eligible/Integration Projects
2. Key IT Initiatives for this administration include:
 - a. MPI
 - b. ICD-10
 - c. EHR Incentive Program
3. Lyon stressed that policy directions heavily dependent on IT developments
4. The Health Insurance Exchange (HIX) in Michigan is a federal partnership with a possibility to become State run in the future.
5. Lyon commented that the Director has an open door policy and that the State must have strong IT to accomplish future policy goals. HIT priorities should be aligned in circular fashion between all initiatives.

F. 2013 HITC Strategic Priorities

1. Vanderstelt presented the HITC strategic priorities for 2013 survey. Comments stressed the following key areas within HIT/HIE :
 - a. Consumer Engagement
 - b. Security (Cyber Security)
 - c. Defining HIE
2. Commissioner Comments: Need to form a blue print of HIT initiatives for consumer engagement. It was also suggested that the HITC look into one statewide definition of HIE that will be used by all HIT/HIE initiatives.

G. HITC 2013 Potential Areas of Focus

1. Vanderstelt led the HITC through the 2013 Planning Matrix. The purpose of the planning Matrix was to evaluate past and current advisory needs related to the Michigan HIT/HIE landscape in 2013.
2. Commissioners Comments: The HITC would like the content of the 2013 Planning Matrix divided into broader “buckets” in which the HITC will use as themes throughout the 2013 HITC meetings. Vanderstelt to take the lead on this action item. The HITC stressed the importance of new technology, cyber security, and the general idea of value and cost effectiveness within the HIT initiatives.

H. HITC 2013 Next Steps

1. The Commission evaluated the role of the HITC in 2013
 - a. It was noted that the Commission should work to align DCH priorities with current HIT and HIE happenings.
 - b. A 2013 work plan was requested to outline HIT Commission activity.

- c. Commissioners requested that meeting materials be offered in advance of upcoming meetings to allow for ample review time and meaningful input during the meeting.
- d. 2013 HIT Commission meetings are to be designed to be more interactive and less presentation based to facilitate discussion.

I. Public Comment

- 1. A commenter stressed that the Commission continue to be aware of national activities and align State activities when possible.
- 2. A commenter noted the importance of creating a full spectrum health record, similar to a credit report.

J. Adjourn

- 1. Meeting Adjourned at 3:45 p.m.